

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>FW</i>	68904	9/5/00
O.I.P.E. CLASSIFIER	<i>FW</i>	328	9/2/00
FORMALITY REVIEW		6188	8-20-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	11/25/00
2	12/25/00
3	12/25/00
4	12/25/00
5	12/25/00
6	12/25/00
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8	12/25/00
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43	12/25/00
44	12/25/00
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47	12/25/00
48	12/25/00
49	12/25/00
50	12/25/00

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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